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PTO/SB/21 (12-97)
Approved for use through 9/30/00. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 5

Application Number	09/716,890
Filing Date	11/20/2000
First Named Inventor	Hon, David N. S.
Group Art Unit	1654
Examiner Name	Patten, Patricia A.
Attorney Docket Number	29290.00

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
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<input type="checkbox"/> Extension of Time Request	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Additional Enclosure(s) (please identify below):
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<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Paul Hodges 20,972
Signature	<i>Paul E. Hodges</i>
Date	8/15/03

CERTIFICATE OF EXPRESS MAILING

EL 988031676 US

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail Post Office to Addressee in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 8/15/03

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

S rial Number: 09/716,890
Filing Date: 11/20/2000
Confirmation: 5003
Applicant: Hon, David N.S. et al;
Assignee: Greystone Medical Group, Inc.
Title: Compositions of Oak Bark Extract, Related Synthetic
Compositions, and Method of Using Same
Docket Number: 29290.00
Examiner: Patricia A. Patten
Tech Center: 1654
Express Mail: EL 988031676 US

**REVOCATION OF POWER OF ATTORNEY AND
APPOINTMENT OF NEW POWER OF ATTORNEY**

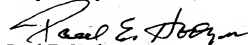
Commissioner for Patents
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Sir:

Please record the enclosed Revocation of Power of Attorney and Appointment of New Power of Attorney in the above identified pending U.S. patent application.

Should there be a fee associated with this request, please charge the same to our Deposit Account No. 16-1910 .

Respectfully submitted,


Paul E. Hodges
Reg. No. 20,972

August 15, 2003

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PTO/SB/82 (06-03)

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**REVOCATION OF POWER OF
ATTORNEY and APPOINTMENT OF
NEW POWER OF ATTORNEY**

Application Number	09/716,890
Filing Date	11/20/2000
First Named Inventor	Hon. David N.S.
Art Unit	1654
Examiner Name	Patten, Patricia A.
Attorney Docket Number	29290.00

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners at Customer Number 22465☒ Please change the correspondence address for the above-identified application to:☐ The address associated with
Customer Number: 22465

OR

<input checked="" type="checkbox"/> Firm or Individual Name					
Address	Pitts & Brittan, P.C.				
Address	P.O. Box 51295				
City	Knoxville				
Country	USA	State	TN	ZIP	37950-1295
Telephone	(865) 584-0105	Fax	(865) 584-0104		

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/196)**SIGNATURE of Applicant or Assignee of Record**Name Greystone Medical Group, Inc., Dan Winnett, Esq., Executive Vice PresidentSignature [Signature]Date 8/8/03Telephone 901-452-2285

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 2 forms are submitted.

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